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**DATE:** September 17, 2007

**PTO IDENTIFIER:** Application Number 10/717,412-Conf. #7251  
Patent Number

**Inventor:** Michael H. MCLERNON et al.

**MESSAGE TO:** US Patent and Trademark Office/ MS Amendment

**FAX NUMBER:** (571) 273-8300

**FROM:** LAHIVE & COCKFIELD, LLP

John S. Curran/NID/cfo

**PHONE:** (617) 994-0732

**Attorney Dkt. #:** MWS-033

**PAGES (Including Cover Sheet):** 38

**CONTENTS:** Transmittal (1 page)  
Fee Transmittal (1 page in duplicate)  
Amendment in Response to Non-Final Office Action (32 pages)  
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
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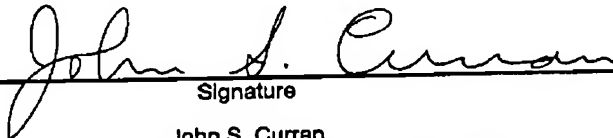
Application No. (if known): 10/717,412

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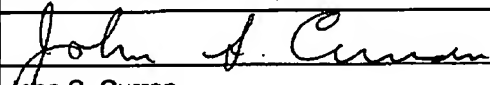
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| <b>TRANSMITTAL<br/>FORM</b><br><br><small>(to be used for all correspondence after initial filing)</small> | Application Number     | 10/717,412-Conf. #7251 |
|  | Filing Date            | November 18, 2003      |
|  | First Named Inventor   | Michael H. MCLERNON    |
|  | Art Unit               | 2109                   |
|  | Examiner Name          | P. S. Salomon          |
| Total Number of Pages In This Submission   | Attorney Docket Number | MWS-033                |

| ENCLOSURES (Check all that apply)  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><br><input type="checkbox"/> Fee Attached<br><br><input checked="" type="checkbox"/> Amendment/Reply<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input checked="" type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Certificate of Transmission |
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## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

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| Firm Name    | LAHIVE & COCKFIELD, LLP   |          |         |
| Signature    |  |          |         |
| Printed name | John S. Curran  |          |         |
| Date         | September 17, 2007  | Reg. No. | 50,4450 |

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Dated: September 17, 2007

Signature:  (John S. Curran)

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PTO/SB/17 (08-07)

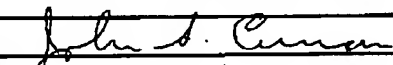
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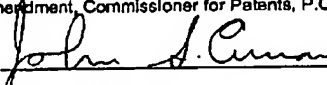
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| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b><br><b>FEE TRANSMITTAL</b><br><b>For FY 2007</b> |  | <b>Complete if Known</b><br>Application Number 10/717,412-Conf. #7251<br>Filing Date November 18, 2003<br>First Named Inventor Michael H. MCLERNON<br>Examiner Name P. S. Salomon<br>Art Unit 2109<br>Attorney Docket No. MWS-033 |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |  |   |  |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 120.00  |  |   |  |

|  |  |
|--|--|
| <b>METHOD OF PAYMENT (check all that apply)</b><br><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____<br><input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP<br>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)<br><input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee<br><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments |  |
|--|--|

| <b>FEE CALCULATION</b><br><b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
|---|--|--|--------------------------------|---------------|-----------------------|---------|--|--------------|--------------|--|----------|---------------|---------|--------|---|--------------------------------|-----|-------------|-----|-----|--|--|----------|-----------------------|-----|-----|-----|----|-----|-----|-----|-----|---|---|--|--|----------|-----------------------|-----|-----|-----|----|-----|----|-----|-----|---|---|--------------------------------|
|   | <b>FILING FEES</b><br><table border="1"> <thead> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>Utility</td><td>300</td><td>150</td></tr> <tr><td>Design</td><td>200</td><td>100</td></tr> <tr><td>Plant</td><td>200</td><td>100</td></tr> <tr><td>Reissue</td><td>300</td><td>150</td></tr> <tr><td>Provisional</td><td>200</td><td>100</td></tr> </tbody> </table> |  | Application Type               | Fee (\$)      | Small Entity Fee (\$) | Utility | 300                                    | 150          | Design       | 200  | 100      | Plant         | 200     | 100    | Reissue   | 300                            | 150 | Provisional | 200 | 100 | <b>SEARCH FEES</b><br><table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>500</td><td>250</td></tr> <tr><td>100</td><td>50</td></tr> <tr><td>300</td><td>150</td></tr> <tr><td>500</td><td>250</td></tr> <tr><td>0</td><td>0</td></tr> </tbody> </table> |  | Fee (\$) | Small Entity Fee (\$) | 500 | 250 | 100 | 50 | 300 | 150 | 500 | 250 | 0 | 0 | <b>EXAMINATION FEES</b><br><table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>200</td><td>100</td></tr> <tr><td>130</td><td>65</td></tr> <tr><td>160</td><td>80</td></tr> <tr><td>600</td><td>300</td></tr> <tr><td>0</td><td>0</td></tr> </tbody> </table> |  | Fee (\$) | Small Entity Fee (\$) | 200 | 100 | 130 | 65 | 160 | 80 | 600 | 300 | 0 | 0 | <b>Fees Paid (\$)</b><br>_____ |
| Application Type  | Fee (\$)   | Small Entity Fee (\$)                            |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Utility   | 300  | 150  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Design  | 200  | 100  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Plant   | 200  | 100  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Reissue   | 300  | 150  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Provisional   | 200  | 100  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Fee (\$)  | Small Entity Fee (\$)  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 500   | 250  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 100   | 50   |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 300   | 150  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 500   | 250  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 0   | 0  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Fee (\$)  | Small Entity Fee (\$)  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 200   | 100  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 130   | 65   |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 160   | 80   |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 600   | 300  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 0   | 0  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| <b>2. EXCESS CLAIM FEES</b>   |  |  |                                |               |                       |         | <b>Small Entity</b><br><b>Fee (\$)</b> |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| <b>Fee Description</b><br>Each claim over 20 (including Reissues)   |  |  |                                |               |                       |         | 50                                     |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Each independent claim over 3 (including Reissues)  |  |  |                                |               |                       |         | 25                                     |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Multiple dependent claims   |  |  |                                |               |                       |         | 200                                    |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
|   |  |  |                                |               |                       |         | 360                                    |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>41</td> <td>48</td> <td>0</td> <td>50.00</td> </tr> </tbody> </table> HP = highest number of total claims paid for, if greater than 20.  |  |  |                                |               |                       |         | Total Claims                           | Extra Claims | Fee (\$)     | Fee Paid (\$)                                    | 41       | 48            | 0       | 50.00  | <b>Multiple Dependent Claims</b><br><b>Fee (\$)</b> |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Total Claims  | Extra Claims   | Fee (\$)   | Fee Paid (\$)                  |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 41  | 48   | 0  | 50.00                          |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
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| Indep. Claims   | Extra Claims   | Fee (\$)   | Fee Paid (\$)                  |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| 12  | 14   | 0  | 200.00                         |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| <b>3. APPLICATION SIZE FEE</b><br>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| <table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>- 100 =</td> <td></td> <td>/50 =</td> <td>(round up to a whole number) x</td> <td></td> </tr> </tbody> </table>                      |  |  |                                |               |                       |         |  | Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) | - 100 = |        | /50 =   | (round up to a whole number) x |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| Total Sheets  | Extra Sheets   | Number of each additional 50 or fraction thereof | Fee (\$)                       | Fee Paid (\$) |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| - 100 =   |  | /50 =  | (round up to a whole number) x |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |
| <b>4. OTHER FEE(S)</b><br>Non-English Specification, \$130 fee (no small entity discount)<br>Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00   |  |  |                                |               |                       |         |  |              |              |  |          |               |         |        |   |                                |     |             |     |     |  |  |          |                       |     |     |     |    |     |     |     |     |   |   |  |  |          |                       |     |     |     |    |     |    |     |     |   |   |                                |

|   |  |                          |  |
|---|--|--------------------------|--|
| <b>SUBMITTED BY</b>   |  |                          |  |
| Signature  | Registration No. (Attorney/Agent) 50,445 | Telephone (617) 994-0732 |  |
| Name (Print/Type) John S. Curran  |  | Date September 17, 2007  |  |

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| Dated: September 17, 2007  | Signature:  (John S. Curran) |